# FORM (RF-3)

# SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/15 New and 01/15/15 Renewal

(1)	(2) Annual Premiur	
Coverage	Volume (Illinois)	) * Change (+or-) **
Automobile Liability	Private	
Passenger		
Commercial	\$20.330	-22.4%
Automobile Physic	al Damag	
Private Passenger		•
Commercial	\$4,450	-4.6%
Liability Other Than	ı Auto	
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machine	ry	
Fire		
Extended Coverage	}	
Inland Marine		+ Hitching Halder and Association and Hall Control of the Control
Homeowners	-	
Commercial Multi-F	'eril	
Crop Hail		, , , , , , , , , , , , , , , , , , , ,
Other		
Line of Insu	ance	4-1014-9-119-14-10-00-00-00-00-00-00-00-00-00-00-00-00-
	oly to certain territory (territorie	es) or certain
Classes? If so,		
specify:	No	
	filing. (If filing follows rates of	an advisory
Organization, spec	•	
organization):	Adopting latest ISC	D Loss Costs
*Adjusted to reflect	all prior rate changes.	
		result from application of new
rates.	any 3 premium lever willen will	Todak norm application of flew
10100.	Acadia Insur	rance Company
	, codard should	Name of Company
	Janel Myers	- Actuarial Technician
		Official – Title

1.

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3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.

#### Section 754.EXHIBIT A Summary Sheet (Form RF-3)

#### FORM (RF-3)

#### **SUMMARY SHEET**

| (1)                             | (2)<br>Annual Premium                 | (3)<br>Percent   |
|---------------------------------|---------------------------------------|------------------|
| Coverage                        | Volume (Illinois) *                   | Change (+or-) ** |
| Automobile Liability Private    |                                       |                  |
| Passenger                       | 1,184,459                             | -0.3%            |
| Commercial                      |                                       |                  |
| Automobile Physical Damag       |                                       |                  |
| Private Passenger               | 413,514                               | 0.0%             |
| Commercial                      |                                       |                  |
| Liability Other Than Auto       |                                       |                  |
| Burglary and Theft<br>Glass     |                                       |                  |
| Fidelity                        | <del></del>                           | <del></del>      |
| Surety                          |                                       |                  |
| Boiler and Machinery            |                                       |                  |
| Fire                            |                                       |                  |
| Extended Coverage               |                                       |                  |
| Inland Marine                   | <del></del>                           | <del></del>      |
| Homeowners                      |                                       |                  |
| Commercial Multi-Peril          |                                       |                  |
| Crop Hail                       | · · · · · · · · · · · · · · · · · · · |                  |
| Other                           | <del></del>                           | <del></del>      |
| Line of Insurance               |                                       |                  |
| Does filing only apply to certa | in territory (territories) o          | r certain        |
| Classes? If so,                 | (31.11.31)                            |                  |
| specify: N/A                    |                                       |                  |

\*Adjusted to reflect all prior rate changes.

Organization, specify

organization):

Brief description of filing. (If filing follows rates of an advisory

Name of Company
Josette D. Kiel, Chief Underwriting Officer

Official - Title

Adoption of Revised ISO Loss Costs Rule 97 Uninsured Motorists Insurance

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

# ILLINOIS DEPARTMENT OF INSURANCE

| Change in Company's premium or rate level  | produced by rate revision effective         | 06/01/2015   |
|--|---|--|
| (1)  | (2) Annual Premium                          | (3)<br>Percent<br>Change (+ or <u>-)**</u>           |
| <u>Coverage</u>  | Volume (Illinois)*                          | Change (+ or -)                                      |
| Automobile Liability Private   |   |  |
| Passenger Commercial   | 191,667                                     | 17.5%  |
| 2. Automobile Physical Damage  | · · · · · · · · · · · · · · · · · · ·       |  |
|  | 109,163                                     | 11.5%  |
| Liability Other Than Auto  |   |  |
|  |   |  |
| 5. Glass   |   |  |
| 6. Fidelity  |   |  |
|  | _   |  |
| 8. Boiler and Machinery  |   |  |
| 9. Fire  |   |  |
| 10. Extended Coverage  |   |  |
| 11. Inland Marine  |   | <del> </del>   |
| 12. Homeowners   |   |  |
| 13. Commercial Multi-Peril   |   |  |
| 14. Crop Hail 15. Other  | <del></del>                                 |  |
| Line of Insurance  | <del></del>                                 |  |
| Does filing only apply to certain territory (terr  | itories) or certain classes? If so, specify | : <u>No.</u>   |
|  | 4   | . avagaination \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| Brief description of filing. (If filing follows ra<br>ISO loss costs (LI-CA-2014-111/CA-2014-E |   |  |
| and Rule Circulars (LI-CA-2013-051/CA-201  | 12-RZR1 LI-CA-2014-112/CA-2014-RP           | AC1) We are adjusting our loss cost                  |
| multipliers to reflect our current expense leve  |   |  |
| revising the ACJ company modification facto  | r and modifying the Expected Loss and       | ALAE Ratios for Experience Rating to                 |
| 59.0% for Liability and 55.5% for Physical Da  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |
| *Adjusted to reflect all prior rate changes.<br>**Change in Company's premium level which      | n will result from application of new rate  | 5.   |
|  | The Charter                                 | Oak Eiro Ingurance Company                           |
|  | ne Charter C                                | Dak Fire Insurance Company Name of Company           |
|  |   | . tottle or company                                  |
|  | Jane Swanso                                 | n - Senior Regulatory Analyst                        |
|  |   | Official – Title                                     |

# FORM (RF-3)

#### SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/15 New and 01/15/15 Renewal

| (1)  | (2)<br>Annual Premium         | (3)<br>Percent                          |
|--|-------------------------------|---|
| Coverage   | Volume (Illinois) *           | Change (+or-) **                        |
| Automobile Liability Private Passenger                       |                               |   |
| Commercial   | \$1,641,866                   | -7.8%                                   |
| Automobile Physical Damag<br>Private Passenger               |                               | •                                       |
| Commercial   | \$1,016,762                   | -2.8%                                   |
| Liability Other Than Auto                                    |                               |   |
| Burglary and Theft   |                               |   |
| Glass  |                               |   |
| Fidelity   |                               |   |
| Surety   |                               |   |
| Boiler and Machinery   | <del>V</del>                  |   |
| Fire   |                               |   |
| Extended Coverage  |                               |   |
| Inland Marine  |                               | *************************************** |
| Homeowners   |                               |   |
| Commercial Multi-Peril                                       |                               |   |
| Crop Hail  |                               |   |
| Other  |                               |   |
| Line of Insurance  | <u></u>                       |   |
| Does filing only apply to certa Classes? If so,              | in territory (territories) or | certain                                 |
| specify: No No   |                               |   |
| Brief description of filing. (If fi                          | ling follows rates of an a    | dvisory                                 |
| Organization, specify organization):                         | Adopting latest ISO Loss      | Costs                                   |
| organization).   | Adopting fatest 130 Loss      | COSIS                                   |
| ***************************************                      | 4                             |   |
| *Adjusted to reflect all prior ra **Change in Company's prem |                               | It from application of new              |
| rates.   | Continental Mosts             | rn Insurance Company                    |
|  |                               |   |
|  | INd<br>Janel Myers - Actur    | me of Company                           |

Official - Title

#### FORM (RF-3)

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 01/01/15 New and 01/15/15 Renewal.

| -   | (1)                                 | (2)                           | (3)                            |
|-----|-------------------------------------|-------------------------------|--------------------------------|
| -   | Ca                                  | Annual Premium                | Percent                        |
|     | Coverage                            | Volume (Illinois) *           | Change (+or-) **               |
| 1.  | Automobile Liability Private        |                               |                                |
|     | Passenger                           |                               |                                |
| _   | Commercial                          | \$64,801                      | -16.1%                         |
| 2   | Automobile Physical Damag           |                               |                                |
|     | Private Passenger                   |                               |                                |
|     | Commercial                          | \$18,635                      | 3.6%                           |
| 3.  | Liability Other Than Auto           |                               |                                |
| 4.  | Burglary and Theft                  |                               |                                |
| 5.  | Glass                               |                               |                                |
| 6.  | Fidelity                            |                               |                                |
| 7.  | Surety                              |                               | <del></del>                    |
| 8.  | Boiler and Machinery                |                               |                                |
| 9.  | Fire                                |                               |                                |
| 10. | Extended Coverage                   |                               |                                |
| 11. | Inland Marine                       |                               | <u> </u>                       |
| 12. | Homeowners                          |                               |                                |
| 13. | Commercial Multi-Peril              |                               |                                |
| 14. |                                     |                               |                                |
| 15. | Crop Hail                           |                               |                                |
| 15. | Other                               |                               |                                |
|     | Line of Insurance                   |                               |                                |
| •   | Does filing only apply to certa     | in territory (territories) or | certain                        |
|     | Classes? If so,                     | arternery (termenes) or       | oon an                         |
|     | specify: No                         |                               |                                |
|     | Specify.                            |                               |                                |
|     | Brief description of filing. (If f  | iling follows rates of an a   | dvison                         |
|     | Organization, specify               | ing lollows rates of art a    | avisory                        |
|     | organization):                      | Adopting latest ISO Loss      | Coete                          |
|     | Organization).                      | Adopting latest 100 2003      | 00313                          |
|     |                                     |                               |                                |
|     | *A division to reflect all prior re | to changes                    |                                |
|     | *Adjusted to reflect all prior ra   |                               | It from application of pow     |
|     | **Change in Company's premates.     | nom rever willon will resu    | п потпаррисацов от пем         |
|     | ાતાલક.                              | Firemon's Incuran             | ce Company of Washington, D.C. |
|     |                                     |                               |                                |
|     |                                     | ivai                          | me of Company                  |

Janel Myers - Actuarial Technician

Official - Title

| SUMMARY | SHEET |
|---------|-------|
|---------|-------|

| Change  | in   | Company's | s premiu | m or  | rate    | level    | produced | bу | rate |
|---------|------|-----------|----------|-------|---------|----------|----------|----|------|
| revisio | on e | effective | 3/1/20   | 15 No | ew; 5/1 | /2015 Re | enewals  |    |      |

|     | (1)                             | (2)                     | (3)        |
|-----|---------------------------------|-------------------------|------------|
|     |                                 | Annual Premium          | Percent    |
|     | Coverage                        | Volume (Illinois)*      |            |
| _   |                                 | - <del></del>           |            |
| 1.  | Automobile Liability            |                         |            |
|     | Private Passenger               | £44 £70                 | +6.0%      |
| _   | Commercial                      | \$14,578                | +0.0%      |
| 2.  | Automobile Physical Damage      |                         |            |
|     | Private Passenger               | <u> </u>                | 14.00/     |
|     | Commercial                      | \$4,724                 | +1.2%      |
| 3.  | Liability Other Than Auto       |                         |            |
| 4.  | Burglary and Theft              |                         |            |
| 5.  | Glass                           |                         |            |
| 6.  | Fidelity                        |                         |            |
| 7.  | Surety                          |                         |            |
| 8.  | Boiler and Machinery            |                         |            |
| 9.  | Fire                            |                         |            |
| LO. | Extended Coverage               |                         |            |
| 11. | Inland Marine                   |                         |            |
| 12. | Homeowners                      |                         |            |
| L3. | Commercial Multi-Peril          |                         |            |
| L4. | Crop Hail                       |                         |            |
| L5. | Other                           |                         |            |
|     | Line of Insurance               |                         |            |
|     |                                 |                         |            |
|     |                                 |                         |            |
|     | es filing only apply to certain | territory (territories) | or certain |
| cla | asses? If so, specify: No.      |                         |            |

Brief description of filing. (If filing follows rates of an advisory organization, list organization): Revised base rates and Company loss cost multipliers.

All territories will be affected. The information on rate level changes is based on estimated premium volume, rating system, and distribution of business (see Exhibit 1).

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

Goodville Mutual Casualty Company

Name of Company

Elmer Landis, Actuarial Analyst
Official - Title

#### FORM (RF-3)

#### SUMMARY SHEET

| Change in Company's pre | mium or ra | ite level produc | ed by rate revision |
|-------------------------|------------|------------------|---------------------|
| effective 02/01/2015    | ,          |                  |                     |

| (1)   | (2)                                    | (3)              |
|---|--|------------------|
|   | Annual Premium                         | Percent          |
| Coverage  | <u>Volume (Illinois) *</u>             | Change (+or-) ** |
| Automobile Liability Private                    | •                                      |                  |
| Passenger                                       | 1,281,547                              | 11.700           |
| Commercial                                      |  |                  |
| Automobile Physical Dama                        | ig                                     |                  |
| Private Passenger                               |  |                  |
| Commercial                                      |  |                  |
| Liability Other Than Auto                       |  |                  |
| Burglary and Theft                              |  |                  |
| Glass   |  |                  |
| Fidelity  |  |                  |
| Surety  |  |                  |
| Boiler and Machinery                            |  |                  |
| Fire  |  |                  |
| Extended Coverage                               |  |                  |
| Inland Marine                                   |  |                  |
| Homeowners                                      |  |                  |
| Commercial Multi-Peril                          |  |                  |
| Crop Hail                                       |  |                  |
| Other   |  |                  |
| Life of Insurance                               |  |                  |
| Does filing only apply to ce<br>Classes? If so, | ertain territory (territories) or      | certain          |
| specify: Appl                                   | ies only to the "other school bus" cla | ss               |
| Priof description of filing /                   | If filing follows rates of an ad       | dvisory          |
| Organization, specify                           | in ming follows rates of an a          | u viaoi y        |
| organization):                                  | Public Auto deviation rate/            | rule submission  |
| organization).                                  | - abile ridio deviation rater          |                  |
|   |  |                  |

New York Marine and General Insurance Company
Name of Company
Cecelia Puglio, Underwriting Compliance Director
Official – Title

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

# ILLINOIS DEPARTMENT OF INSURANCE

| Change in Company's premium or rate le        | evel produced by rate revision effective         | 06/01/2015                               |
|---|--|--|
| (1)   | (2)<br>Annual Premium                            | (3)<br>Percent                           |
| Coverage                                      | Volume (Illinois)*                               | <u>Change (+ or -)**</u>                 |
| Automobile Liability Private                  |  |  |
| Passenger Commercial                          | 61,710   | 17.6%                                    |
| 2. Automobile Physical Damage                 | <del>-</del>                                     |  |
| Private Passenger Commercial                  | 40,114   | 11.0%                                    |
| 3. Liability Other Than Auto                  |  |  |
| Burglary and Theft                            |  |  |
| 5. Glass                                      |  |  |
| 6. Fidelity                                   |  |  |
| 7. Surety                                     | <u> </u>   |  |
| Boiler and Machinery                          |  |  |
| 9. Fire                                       |  |  |
| 10. Extended Coverage                         |  |  |
| 11. Inland Marine                             |  |  |
| 12. Homeowners                                |  |  |
| 13. Commercial Multi-Peril                    |  | <del></del>                              |
| 14. Crop Hail                                 |  |  |
| 15. Other Line of Insurance                   |  |  |
| Line of insurance                             |  |  |
| Does filing only apply to certain territory ( | territories) or certain classes? If so, specify: | No                                       |
| Does iming only apply to contain torritory (  |  |  |
|   |  | MART - 11                                |
|   | rates of an advisory organization, specify       |  |
|   | 4-BRLA1, LI-CA-2013-052/CA-2012-RZRL             |  |
|   | 2012-RZR1, LI-CA-2014-112/CA-2014-RP/            |  |
| multipliers to reflect our current expense    | level & recent experience. In addition, we a     | are corrcting/clarifying our rule pages, |
|   | actor and modifying the Expected Loss and        | ALAE Ratios for Experience Rating to     |
| 59.0% for Liability and 55.5% for Physica     | Damage.  |  |
| <u></u>                                       | <del></del>                                      |  |
|   |  |  |
| ** P  |  |  |
| *Adjusted to reflect all prior rate changes.  |  |  |
| **Change in Company's premium level wi        | hich will result from application of new rates   | •  |
|   | The Dhee   | niy Inguranga Company                    |
|   |  | nix Insurance Company Name of Company    |
|   | '  | tune or company                          |
|   | Jane Swanson                                     | - Senior Regulatory Analyst              |
|   |  | Official – Title                         |
|   |  |  |

# ILLINOIS DEPARTMENT OF INSURANCE

| Change in Company's premium or rate le   | evel produced by rate revision effective   | 06/01/2015   |
|--|--|--|
| (1)  | (2)<br>Annual Premium  | (3)<br>Percent   |
| <u>Coverage</u>  | Volume (Illinois)*   | <u>Change (+ or -)**</u>   |
| Automobile Liability Private   |  |  |
| Passenger Commercial   | 797,999  | <u>12.7%</u>   |
| Automobile Physical Damage   |  |  |
| Private Passenger Commercial   | 505,14 <u>9</u>  | 5.9%   |
| <ol><li>Liability Other Than Auto</li></ol>  |  |  |
| <ol><li>Burglary and Theft</li></ol>   |  |  |
| 5. Glass   |  |  |
| 6. Fidelity  |  |  |
| 7. Surety  |  |  |
| 8. Boiler and Machinery  |  |  |
| 9. Fire  |  |  |
| 10. Extended Coverage  |  |  |
| 11. Inland Marine  |  |  |
| 12. Homeowners   |  |  |
| 13. Commercial Multi-Peril   |  |  |
| 14. Crop Hail<br>15. Other   |  |  |
| Line of Insurance  |  |  |
| Brief description of filing. (If filing follows ISO loss costs (LI-CA-2014-111/CA-2014-11/CA-2 | territories) or certain classes? If so, specify: s rates of an advisory organization, specify: 14-BRLA1, LI-CA-2013-052/CA-2012-RZRL -2012-RZR1, LI-CA-2014-112/CA-2014-RP | organization): We are adopting new<br>C, LI-CA-2013-164/CA-2013-BRLA1) |
| multipliers to reflect our current expense   | level & recent experience. In addition, we   | are correting/clarifying our rule pages.                               |
| revising the ACJ company modification f  | actor and modifying the Expected Loss and  | ALAE Ratios for Experience Rating to                                   |
| 59.0% for Liability and 55.5% for Physica  |  |  |
|  |  | ·  |
|  |  |  |
| *Adjusted to reflect all prior rate changes **Change in Company's premium level w  | hich will result from application of new rates   | s.   |
|  | Travelers Casualt  | / Insurance Company of America   |
|  |  | Name of Company  |
|  |  | 0 0  |
|  | Jane Swansor   | n - Senior Regulatory Analyst Official - Title                         |
|  |  | Official - Title   |

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in Company's premium or rate le         | evel produced by rate revision effective  | 06/01/2015                           |
|--|---|--------------------------------------|
| (1)  | (2)<br>Annual Premium   | (3)<br>Percent                       |
| <u>Coverage</u>                                | Volume (Illinois)*  | <u>Change (+ or -)**</u>             |
| Automobile Liability Private                   |   |                                      |
| Passenger Commercial                           | 288,858   | 18.1%                                |
| 2. Automobile Physical Damage                  |   |                                      |
| Private Passenger Commercial                   | 180,349   | 11.1%                                |
| 3. Liability Other Than Auto                   |   |                                      |
| 4. Burglary and Theft                          |   |                                      |
| 5. Glass                                       |   |                                      |
| 6. Fidelity                                    |   |                                      |
| 7. Surety                                      |   |                                      |
| B. Boiler and Machinery                        | <del></del>   |                                      |
| 9. Fire  |   |                                      |
| 10. Extended Coverage<br>11. Inland Marine     |   |                                      |
| 12. Homeowners                                 |   |                                      |
| 13. Commercial Multi-Peril                     |   |                                      |
| 14. Crop Hail                                  |   |                                      |
| 15. Other                                      |   |                                      |
| Line of Insurance                              |   |                                      |
| Does filing only apply to certain territory (  | (territories) or certain classes? If so, specify  | r. No.                               |
|  |   |                                      |
|  |   |                                      |
|  | s rates of an advisory organization, specif   |                                      |
| SO 10SS COSTS (LI-CA-2014-111/CA-20            | <u>14-BRLA1, LI-CA-2013-052/CA-2012-RZR</u><br>-2012-RZR1, LI-CA-2014-112/CA- <u>201</u> 4-RF | 20C1) Mo are editating our loss cost |
|  | level & recent experience. In addition, we  |                                      |
| revising the AC I company modification f       | actor and modifying the Expected Loss and   | ALAF Ratios for Experience Rating to |
| 59.0% for Liability and 55.5% for Physica      |   |                                      |
| 50.0 70 101 Eldonity and 50.0 70 101 1 1170/05 | n Bamago.   |                                      |
| · · · · · · · · · · · · · · · · · · ·          |   |                                      |
|  |   | <del></del>                          |
| Adjusted to reflect all prior rate changes     |   |                                      |
| **Change in Company's premium level w          | hich will result from application of new rate   | S.                                   |
|  | The Trav  | elers Indemnity Company              |
|  |   | Name of Company                      |
|  |   |                                      |
|  | Jane Swanso   | n - Senior Regulatory Analyst        |
|  |   | Official – Title                     |

# ILLINOIS DEPARTMENT OF INSURANCE

| Char         | nge in Company's premium or rate le      | evel produced by rate revision effective          | 06/01/2015                               |
|--------------|--|---|--|
|              | (1)                                      | (2)<br>Annual Premium                             | (3)<br>Percent                           |
|              | Coverage                                 | Volume (Illinois)*                                | Change (+ or -)**                        |
| 1. /         | Automobile Liability Private             |   |  |
|              | Passenger Commercial                     | 124,891   | <u> 17.1%</u>                            |
| 2. /         | Automobile Physical Damage               |   |  |
|              |  | 79,761  | 11.1%                                    |
|              | _iability Other Than Auto                |   |  |
|              | Burglary and Theft                       |   |  |
|              | Glass                                    |   |  |
|              | Fidelity                                 |   |  |
|              | Surety                                   |   |  |
|              | Boiler and Machinery                     |   |  |
| 9. F         |  |   |  |
|              | Extended Coverage                        | · · · · · · · · · · · · · · · · · · ·             |  |
|              | nland Marine                             |   |  |
| . — .        | Homeowners                               |   |  |
|              | Commercial Multi-Peril                   |   |  |
|              | Crop Hail                                |   |  |
| 15. (        | Other<br>Line of Insurance               | <del></del>                                       |  |
|              | Line of maurance                         |   |  |
| Does         | s filing only apply to certain territory | (territories) or certain classes? If so, specify: | No.                                      |
|              |  |   |  |
|              |  |   |  |
| Brief        | description of filing. (If filing follow | s rates of an advisory organization, specify      | organization): We are adopting new       |
| <u> ISO</u>  | loss costs (LI-CA-2014-111/CA-20         | 14-BRLA1, LI-CA-2013-052/CA-2012-RZRL             | <u>.C. LI-CA-2013-164/CA-2013-BRLA1)</u> |
|              |  | -2012-RZR1, LI-CA-2014-112/CA-2014-RP             |  |
| <u>multi</u> | pliers to reflect our current expense    | level & recent experience. In addition, we        | are correting/clarifying our rule pages, |
| <u>revis</u> | ing the ACJ company modification f       | actor and modifying the Expected Loss and         | ALAE Ratios for Experience Rating to     |
| <u>59.0'</u> | % for Liability and 55.5% for Physica    | al Damage.  |  |
|              |  |   | <u> </u>                                 |
|              |  |   | • •                                      |
| * A ~i:.     | usted to reflect all prior rate changes  |   |  |
|              |  | which will result from application of new rates   |  |
| CH           | ange in Company's premium lever w        | which will result from application of new rates   | •  |
|              |  | The Travelers In                                  | ndemnity Company of America              |
|              |  |   | Name of Company                          |
|              |  |   | • •                                      |
|              |  | Jane Swasnor                                      | - Senior Regulatory Analyst              |
|              |  | <del></del>                                       | Official – Title                         |
|              |  |   |  |

# ILLINOIS DEPARTMENT OF INSURANCE

| Change in Company's premium or rate level produced by rate revision effective _ |  | 06/01/2015  |   |
|---|--|---|---|
|   | (1)  | (2)<br>Annual Premium   | (3)<br>Percent                          |
|   | <u>Coverage</u>                            | Volume (Illinois)*  | Change (+ or -)**                       |
| 1. ,  | Automobile Liability Private               |   |   |
|   | Passenger Commercial                       | 442,372   | 17 <u>.1%</u>                           |
| 2. ,  | Automobile Physical Damage                 |   |   |
|   | Private Passenger Commercial               | 263,016   | 10.7%                                   |
| 3. 1  | Liability Other Than Auto                  |   |   |
|   | Burglary and Theft                         |   |   |
|   | Glass                                      |   |   |
|   | Fidelity                                   |   |   |
|   | Surety                                     |   |   |
|   | Boiler and Machinery                       |   |   |
| 9.  |  |   |   |
|   | Extended Coverage                          |   |   |
|   | Inland Marine                              |   |   |
|   | Homeowners                                 |   |   |
| 13.   | Commercial Multi-Peril                     |   |   |
| 14.   | Crop Hail                                  |   |   |
|   | Other                                      |   |   |
|   | Line of Insurance                          |   |   |
| Doe:  | s filing only apply to certain territory ( | territories) or certain classes? If so, specify:                              | No.                                     |
| Brief   | description of filing. (If filing follows  | rates of an advisory organization, specify                                    | organization): We are adopting new      |
| 150   | loss costs (LI-CA-2014-111/CA-201          | 4-BRLA1, LI-CA-2013-052/CA-2012-RZRL<br>2012-RZR1, LI-CA-2014-112/CA-2014-RP/ | C, L1-CA-2013-104/CA-2013-BREAT)        |
| and<br>mult   | inliers to reflect our current expense     | level & recent experience. In addition, we                                    | are correting/clarifying our rule pages |
| rovis   | ing the ACI company modification fa        | actor and modifying the Expected Loss and                                     | ALAE Ratios for Experience Rating to    |
| 50 N  | % for Liability and 55.5% for Physica      | I Damage.   | MEME I TO THE POPULATION OF TAKING TO   |
| <u>55.0</u>   | 70 TOT LIABILITY AND 30.070 TOT 1 TYSICA   | r Damage.   |   |
|   | **************************************     |   |   |
|   |  | · · · · · · · · · · · · · · · · · · ·   |   |
| *Adj  | usted to reflect all prior rate changes.   | hich will result from application of new rates                                |   |
| CI  | larige in Company's premium lever wi       | men will result from application of new rates                                 | •                                       |
|   |  | The Travelers Ind   | emnity Company of Connecticut           |
|   |  |   | Name of Company                         |
|   |  |   | . ,                                     |
|   |  | Jane Swansor  | n - Senior Regulatory Analyst           |
|   |  |   | Official – Title                        |
|   |  |   |   |

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in Company's premium or rate level  | produced by rate revision effective  | 06/01/2015   |
|--|--|--|
| (1)  | (2)<br>Annual Premium  | (3)<br>Percent   |
| Coverage   | Volume (Illinois)*   | <u>Change (+ or -)**</u>   |
| Automobile Liability Private   |  |  |
| Passenger Commercial   | 215,434  | 17.2%  |
| Automobile Physical Damage   |  |  |
|  | 137,653  | 10.8 <u>%</u>  |
| Liability Other Than Auto  | · 44.———   |  |
| <ol><li>Burglary and Theft</li></ol>   | . <u>-</u>   |  |
| 5. Glass   |  |  |
| 6. Fidelity  |  |  |
| 7. Surety  |  |  |
| Boiler and Machinery   | W-1 44-7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1   |  |
| 9. Fire  | · · · · · · · · · · · · · · · · · · ·  | <u> </u>   |
| 10. Extended Coverage  |  |  |
| 11. Inland Marine  | · · · · <u>· · · · · · · · · · · · · · · </u>  |  |
| 12. Homeowners   |  |  |
| 13. Commercial Multi-Peril   |  |  |
| 14. Crop Hail  | <del> </del>   |  |
| 15. Other Line of Insurance  |  |  |
| Does filing only apply to certain territory (terr  | itories) or certain classes? If so, specify  | : <u>No.</u>   |
| Brief description of filing. (If filing follows ra ISO loss costs (LI-CA-2014-111/CA-2014-E and Rule Circulars (LI-CA-2013-051/CA-20 multipliers to reflect our current expense lever revising the ACJ company modification factors 59.0% for Liability and 55.5% for Physical Descriptions. | BRLA1, LI-CA-2013-052/CA-2012-RZR<br>12-RZR1, LI-CA-2014-112/CA-2014-RF<br>el & recent experience. In addition, we<br>or and modifying the Expected Loss and | LC, LI-CA-2013-164/CA-2013-BRLA1) PAC1). We are adjusting our loss cost are correting/clarifying our rule pages, |
| <del></del>  |  |  |
|  |  |  |
| *Adjusted to reflect all prior rate changes.<br>**Change in Company's premium level whicl  | n will result from application of new rate   | S.   |
|  | Travelers Proper   | ty Casualty Company of America   |
|  |  | Name of Company  |
|  | lane Swaneo  | n - Senior Regulatory Analyst  |
|  | <u> </u>   | Official – Title   |

# FORM (RF-3)

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 01/01/15 New and 01/15/15 Renewal

|  | (1)  | (2)<br>Annual Premium                 | (3)<br>Percent             |
|--|--|---------------------------------------|----------------------------|
|  | Coverage -   | Volume (Illinois) *                   | Change (+or-) **           |
|  | Automobile Liability Private   |                                       |                            |
|  | Passenger  |                                       |                            |
|  | Commercial   | \$79,036                              | -16.9%                     |
|  | Automobile Physical Damag  |                                       |                            |
|  | Private Passenger  |                                       | •                          |
|  | Commercial   | \$15,357                              | -0.5%                      |
|  | Liability Other Than Auto  |                                       |                            |
|  | Burglary and Theft   |                                       |                            |
|  | Glass  |                                       |                            |
|  | Fidelity   |                                       |                            |
|  | Surety   |                                       |                            |
|  | Boiler and Machinery   |                                       |                            |
|  | Fire   |                                       |                            |
|  | Extended Coverage  |                                       |                            |
|  | Inland Marine  |                                       |                            |
|  | Homeowners   |                                       |                            |
|  | Commercial Multi-Peril   |                                       |                            |
|  | Crop Hail  |                                       | <u> </u>                   |
|  | Other  |                                       |                            |
|  | Line of Insurance  |                                       |                            |
|  | Does filing only apply to certa                                      | in territory (territories) or         | certain                    |
|  | Classes? If so,  | , , ,                                 |                            |
|  | specify: No  |                                       |                            |
|  |  |                                       |                            |
|  | Brief description of filing. (If fi                                  | ling follows rates of an a            | dvisory                    |
|  | Organization, specify  |                                       |                            |
|  | organization):   | Adopting latest ISO Loss              | Costs                      |
|  |  | · · · · · · · · · · · · · · · · · · · |                            |
|  | *Adjusted to reflect all prior re                                    | to abangos                            |                            |
|  | *Adjusted to reflect all prior ra<br>**Change in Company's premates. |                                       | It from application of new |
|  |  | Union Insurance C                     | Company                    |
|  |  |                                       | me of Company              |
|  |  | lanel Myers . Actus                   | • •                        |

Official - Title